A-G-E-N-D-A

2nd Meeting - CIA Retirement Board

18 March 1965

STATINTL

1. Introduction of ███████ Finance Adviser   Echols

2. Minutes of First Meeting   Echols

3. Questions from Board Members regarding
   Background and Reference Materials   Echols

4. Description of Procedures for Screening
   On Duty Personnel and Designating
   Participants

   (Service Agreement)   STATINTL

   ███████

5. Finance Matters   (Echols)

                                              STATINTL
6. Other Business as Time Permits   ███████

                                              Echols

ACB __2__   REV DATE _8-2-82_ BY __ON<199__
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JUST _22_ NEXT REV_2012_ AUTH: HR 70-2

NOMINATION AND DESIGNATION OF PARTICIPANT
CIA RETIREMENT AND DISABILITY SYSTEM

25X1A

SECTION A	STATUS OF EMPLOYEE			

1. SERIAL NUMBER	2. NAME *(Last-First-Middle)*	3. DATE OF BIRTH	4. SD	5. EMPLOYMENT CATEGORY
				████████

6. CURRENT OCCUPATIONAL TITLE	7. GRADE	8. OFFICE OF ASSIGNMENT

9. ASSIGNMENT LOCATION ➡ ☐ DEPARTMENTAL ☐ U.S. FIELD ☐ FGN. FIELD	10. LONGEVITY COMPUTATION DATE	11. SERVICE COMPUTATION DATE

SECTION B	PERFORMANCE OF QUALIFYING SERVICE

1. Has this employee completed any qualifying service?   ☐ YES   ☐ NO. If "Yes", list periods of such service below

INCLUSIVE DATES (From- To-)		OCCUPATIONAL TITLE	LOCATION WHERE SERVICE PERFORMED *(City-Country or State)*	CHECK ONE		TOTAL TIME	
MONTH/DAY/YR	MONTH/DAY/YR			PCS	TDY	MONTH	DAYS

2. Is this employee currently performing qualifying service?   ☐ YES ☐ NO. If "Yes", complete the following:

BEGIN DATE	END DATE	OCCUPATIONAL TITLE	LOCATION	PCS	TDY	MONTHS	DAYS

3. If employee was assigned in the United States during any period of qualifying service listed above, describe his duties below, pointing out those conditions which meet the requirements of QUALIFYING SERVICE.

4. Is this employee currently on official orders for a PCS assignment requiring the performance of qualifying service? ☐ YES ☐ NO. If "Yes", attach a conformed copy of the orders.

5. CERTIFICATION - The information furnished above has been verified against official Agency records. Where no official record was available, a supporting statement is attached.

6. TYPED NAME AND TITLE	7. SIGNATURE	8. DATE

FORM
3-65   3100   SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(4)

Approved For Release 2001/07/28 : CIA-RDP78-03092A000100020003-3

SECTION C   RECOMMENDATION OF HEAD OF CAREER SERVICE

1. Based on his career assignment and past and prospective performance of qualifying service, this employee is recommended for designation as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM. He is serving in a career field which normally requires the performance of qualifying service as an integral part of a career in that field. He will be expected to perform qualifying service during the next five years unless otherwise noted below.

2. TYPED NAME AND TITLE	3. SIGNATURE	4. DATE

SECTION D   RECOMMENDATION OF CIA RETIREMENT BOARD

1. The record of this employee has been reviewed and the CIA RETIREMENT BOARD has recommended on _____
   that this employee: (DATE)

   ☐ be designated as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM
   ☐ NOT be designated as a participant

2. TYPED NAME AND TITLE	3. SIGNATURE	4. DATE

SECTION E   DETERMINATION BY DIRECTOR OF PERSONNEL

1. It is determined that this employee ☐ meets ☐ does not meet the requirements of Regulation ■■■ for designation as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM.	2. SIGNATURE OF DIRECTOR OF PERSONNEL	3. DATE